Complete Summary

GUIDELINE TITLE

Guideline for the use of Neurontin® in the management of neuropathic pain.

BIBLIOGRAPHIC SOURCE(S)

Washington Department of Labor and Industries, Washington State Medical Association. Guideline for the use of Neurontin in the management of neuropathic pain. Seattle (WA): Washington Department of Labor and Industries, Washington State Medical Association; 2002. 5 p. [12 references]

COMPLETE SUMMARY CONTENT

SCOPE

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EVIDENCE SUPPORTING THE RECOMMENDATIONS

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IMPLEMENTATION OF THE GUIDELINE

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IDENTIFYING INFORMATION AND AVAILABILITY

SCOPE

DISEASE/CONDITION(S)

Neuropathic pain

GUIDELINE CATEGORY

Management Treatment

CLINICAL SPECIALTY

Anesthesiology
Family Practice
Internal Medicine
Neurological Surgery
Neurology
Orthopedic Surgery
Physical Medicine and Rehabilitation

Podiatry Rheumatology

INTENDED USERS

Advanced Practice Nurses Physicians

GUIDELINE OBJECTIVE(S)

To provide assistance to treating physicians in the use of Neurontin® in the management of neuropathic pain

TARGET POPULATION

Injured workers with neuropathic pain

INTERVENTIONS AND PRACTICES CONSIDERED

Gabapentin (Neurontin®)

MAJOR OUTCOMES CONSIDERED

Pain relief

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Searches of Electronic Databases

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

The guideline developer performed literature searches of the U.S. National Library of Medicine's Medline database to identify data related to the injured worker population.

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Expert Consensus (Committee)

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not stated

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Not stated

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

External Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

Following input from community-based practicing physicians, the guideline was further refined.

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

Neurontin® has been approved for use in the treatment of post-herpetic neuralgia and there is scientific research that indicates it may be effective in the treatment of other conditions that result in neuropathic pain.

There is no scientific evidence that Neurontin® is effective in treating acute pain, somatic pain from sprains or strains, or myofascial pain.

In this guideline, chronic pain has been classified into three categories with recommendations for use of Neurontin® for each category.

Category 1

Neurontin® is most likely to be effective when it is prescribed for the following neuropathic pain conditions:

- Peripheral nerve injury
- Peripheral polyneuropathy
- Cauda equina syndrome
- Spinal cord injury
- Complex Regional Pain Syndrome Type II (CRPS Type II)
- HIV and cancer related neuropathies
- Radiculopathy, chronic, not acute
- Other conditions with objective finding of nerve injury and a clearly documented history of neuropathic symptoms

Category 2

Neurontin® is less likely to be effective when it is prescribed for questionable neuropathic pain conditions with no objective finding of nerve injury, such as complex regional pain syndrome (CRPS) Type I. Accordingly, prescriptions for gabapentin (Neurontin®) for questionable neuropathic pain conditions with no objective finding of nerve injury should be written only after prior consultation and recommendation from a physician specializing in pain therapies, rehabilitation and physical medicine, or neurology.

Category 3

There is no credible scientific evidence that Neurontin® is effective in relieving pain associated with the following non-neuropathic pain conditions:

- Acute musculoskeletal pain
- Primary somatic pain from chronic musculoskeletal strain/sprain
- Low back pain without radiculopathy
- Tendinitis
- Repetitive strain without evidence of entrapment neuropathy

Recommended Dosing

Refer to the original guideline document for a recommended dosing plan for Neurontin® in the management of neuropathic pain.

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

The type of supporting evidence is not specifically stated for each recommendation. The guideline is based on a literature review of the current scientific information and on expert opinion from actively practicing physicians who regularly treat patients with this condition.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

- Appropriate physician prescribing of Neurontin® in injured workers
- Identification of injured workers with conditions most likely to respond to Neurontin®
- Alleviation or reduction of neuropathic pain in injured workers with conditions most likely to benefit from Neurontin®

POTENTIAL HARMS

- The most common side effects associated with the use of Neurontin® in adults are dizziness, somnolence, and peripheral edema. Accordingly, patients should be advised not to drive a car or operate other complex machinery until they have gauged whether or not Neurontin® affects their mental and/or motor performance.
- Patients who require concomitant treatment with morphine may experience increases in gabapentin concentrations and should be observed for signs of central nervous system (CNS) depression and the dose of Neurontin® or morphine should be reduced appropriately.

QUALIFYING STATEMENTS

QUALIFYING STATEMENTS

The guideline-setting process will be iterative, that is, although initial guidelines may be quite liberally constructed, subsequent tightening of the guideline would occur as other national guidelines are set, or other scientific evidence (e.g., from outcomes research) becomes available. This iterative process stands in contrast to the method in some states of placing guidelines in regulation. Although such regulation could aid in the dissemination and quality oversight of guidelines, flexibility in creating updated guidelines might be limited.

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

This guideline is published in a provider bulletin which is mailed to all health care providers (e.g., physicians, osteopaths, physician assistants, nurse practitioners, pain clinics, and pharmacists) that have a provider number with the Washington State Department of Labor and Industries. Specialized training on the guideline is also given to all department claim managers.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

Living with Illness

IOM DOMAIN

Effectiveness

IDENTIFYING INFORMATION AND AVAILABILITY

BIBLIOGRAPHIC SOURCE(S)

Washington Department of Labor and Industries, Washington State Medical Association. Guideline for the use of Neurontin in the management of neuropathic pain. Seattle (WA): Washington Department of Labor and Industries, Washington State Medical Association; 2002. 5 p. [12 references]

ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

2002

GUIDELINE DEVELOPER(S)

Washington State Department of Labor and Industries - State/Local Government Agency [U.S.]

SOURCE(S) OF FUNDING

Not stated

GUI DELI NE COMMITTEE

Washington State Department of Labor and Industries (L&I)

Washington State Medical Association (WSMA) Industrial Insurance Advisory Section of the Interspecialty Council

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

Medical Director, Washington State Department of Labor and Industries (L&I): Gary Franklin, MD

The individual names of the Washington State Medical Association (WSMA) Industrial Insurance Advisory Section of the Interspecialty Council are not provided in the original guideline document.

FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

Not stated

GUIDELINE STATUS

This is the current release of the guideline.

GUIDELINE AVAILABILITY

Print copies: Available from the L&I Warehouse, Department of Labor and

Industries, P.O. Box 44843, Olympia, Washington 98504-4843.

AVAILABILITY OF COMPANION DOCUMENTS

This guideline is one of 17 guidelines published in the following monograph:

Medical treatment guidelines. Washington State Department of Labor and

Industries, 2002 Aug. 108 p.

Print copies: Available from the L&I Warehouse, Department of Labor and

Industries, P.O. Box 44843, Olympia, Washington 98504-4843.

PATIENT RESOURCES

None available

NGC STATUS

This NGC summary was completed by ECRI on March 14, 2003. The information

was verified by the guideline developer on March 27, 2003.

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